

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Reset Form

IA ETHICS AND
CAMPAIGN DISCLOSURE BD.
FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

2009 APR 24 AM 11:33

COMMITTEE NAME (Must be same as on Statement of Organization)

Brian Quirk for State Representative

IMPORTANT: Indicate by # type of committee you are reporting for: ☐

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Brian Quirk

Political Party (if applicable)

Democratic

Office Sought

State Representative

District (if Senate or House)

HD 15

FORM DR-2 (Rev. 07/2007)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>1255</u>
Logged In	
Scanned	
Computer	<u>WRS WRS</u>
Audited	

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Shirley Shekela

SIGNATURE OF PERSON FILING REPORT

641-394-5319

TELEPHONE

4-23-09

DATE SIGNED

I AM FILING A _____ REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by # ☐

☒ CHECK IF AMENDMENT TO REPORT DATED Jan 18, 2005

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$11,120.76

11,070.36

ADD TOTAL MONEY TAKEN IN THIS PERIOD

adj. 40¢

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

3,635.00

Schedule F: Loans Received total (Attach Schedule F)

0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

\$13 -0 -

2747.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$

14,705.36

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

8,894.27

Schedule F: Loan Repayments total (Attach Schedule F)

0

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$13 5861.09

5811.09

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$

40.00 -

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$13 2747.00 \$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FORM. IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Brian Quirk for State Representative

NO CHANGE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11/01/04	ID# CK# 310	Tia Fink 230 2nd Ave Cresco, Ia 52136	organize campaign database and run errands for campaign	\$ 1000.00
11/02/04	ID# CK# 378	Kolbys 601 Milwaukee New Hampton, Ia. 50659	food for campaign volunteers	25.00
11/02/04	ID# CK# 379	Warren Brown 400 2nd Ave Cresco, Ia 52136	organizing data base and run errands for campaign	500.00
11/04/04	ID# CK# 380	D.S.S Lim Ave New Hampton, Ia. 50659	food & bev for election night volunteers	300.00
11/04/04	ID# CK# 501	Wendy Wahl 626 Milwaukee New Hampton, Ia. 50659	catering for election night volunteers	400.00
11/05/04	ID# CK# 502	Chaffs 601 Milwaukee New Hampton, Ia. 50659	food & bev for campaign meeting	40.00
11/06/04	ID# CK# 531	Chaffs 601 Milwaukee New Hampton, Ia. 50659	food & bev for campaign meeting	45.00
11/28/04	ID# CK# 532	Brian Quirk 1011 Sunset New Hampton, Ia. 50659	Reimbursement for Computer, hdlr, software, office space, office supplies, storage	3500.00

SUB-TOTAL \$ 5815.00

TOTAL (If last page of this schedule)

\$ 5815.00

5810.00

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 2

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

IA ETHICS AND CAMPAIGN DISCLOSURE BOARD

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATE OR FEDERAL CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Brian Quirk for State Representative

NO CHANGE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
12/16/04	ID# CK# 533	Truman Fund	Donation	\$ 3000.00 ✓
01/10/05	ID# CK# 503	Carter Printing Grand Ave Des Moines	Letter head + env.	84.27 ✓
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$ 3084.27 ✓

TOTAL (if last page of this schedule) \$ 3084.27 ✓

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

RESET

THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY

COMMITTEE NAME (Must be same as on Statement of Organization)

Brian Quirk for State Representation

SCHEDULE

H

(Rev. 02/08)

CAMPAIGN
PROPERTYATTACH SCHEDULE H TO
EACH REPORT, MAKING
CHANGES AS REQUIRED.☒ CHECK THIS BOX IF
AMENDING FORM**PART I - ONGOING INVENTORY OF CAMPAIGN PROPERTY**

Date Purchased (Schedule B) or Date Received (Schedule E) (MM/DD/YR)	Description of Property	Purchase Price or Est. Value When Acquired*	Current Value at Fair Market This Report
11/28/04	Computer	2747.00	2747.00

2009 APR 24 AM 11:33
CAMPAIGN DISCLOSURE BD.

TOTAL VALUE CAMPAIGN PROPERTY THIS REPORT (TRANSFER TO SUMMARY PAGE) \$ 2747

* If estimated, show est. beside figure.

PART II - SALES OR TRANSFERS OF CAMPAIGN PROPERTY **

Date (MM/DD/YR)	Name and Address of Purchaser/Donee	Description of Property	Sold? Y/N	Sale Price	Value of Donation

TOTALS \$ _____ \$ _____

** PROPERTY SALES & TRANSFERS TOTAL (TRANSFER TO SUMMARY PAGE) \$ _____

(Attach Additional Schedules if Needed)

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>1255</u>
Logged In	<u>[initials]</u>
Scanned	<u>[initials]</u>
Computer	<u>WRS</u>
Audited	<u>8-25-05</u>

COMMITTEE NAME (Must be same as on Statement of Organization)

Brian Quirk for State Representative

IMPORTANT: Indicate by # type of committee you are reporting for: 1
(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other
Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political
Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name	<u>Brian Quirk</u>	JAN 19 2006	Political Party (if applicable)	<u>Democrat</u>
Office Sought	<u>State Rep.</u>	<u>HD</u>	District (if Senate or House)	<u>15</u>

Late reports are subject to possible civil and criminal penalties.

Brian A. Quirk
SIGNATURE OF PERSON FILING REPORT

1041-394-4550
TELEPHONE

18 JAN 05
DATE SIGNED

I AM FILING A Disclosure 1-19-05 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate by # 1

- ☐ CHECK IF AMENDMENT TO REPORT DATED See amended report
- ☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election
County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

918 12,041.68 \$ 12,041.64

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	<u>1.14 adjusting entry</u>	<u>3635.00</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>0.00</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>0.00</u>

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 15676.64

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	<u>513 8894.27</u>	<u>8895.27</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>0.00</u>

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)

16781.27

**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ <u>0.00</u>
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ <u>40.00</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$ <u>0.00</u>

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

☐ YES ☐ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ _____

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Brian Quirk for State Representation

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
✓ 11/05/04	ID# 6494 CK# 072902	SAC + FOX TRIBE OF MISSISSIPPI in Iowa 349 Meskwaki Road TAMA, IA 52339 9634		\$ 3000 ⁰⁰	<input type="checkbox"/>
✓ 11/05/04	ID# 6078 CK# 1609	Iowa Physical Therapy PAC 1228 8th St. Suite 106 West Des Moines, Ia. 50265		100 ⁰⁰	<input type="checkbox"/>
✓ 11/06/04	ID# 6034 CK# 1511	Engineers Political Action Committee 1000 Walnut St. Suite 102 Des Moines, Ia. 50309		200 ⁰⁰	<input type="checkbox"/>
✓ 11/06/04	ID# 6478 CK# 1149	IANA-PAC Iowa Assoc. of Nurse Anesthetists Baynard, Ia. 50029		100 ⁰⁰	<input type="checkbox"/>
✓ 11/06/04	ID# 6160 CK# 2165	Iowa Independent Bankers PAC 1603 - 22nd St. Suite 202 West Des Moines, Ia. 50266		150 ⁰⁰	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
11/04/04	ID# CK#	Joyce Becker 3322 240th St. Cresco, Ia. 52136		25 ⁰⁰	<input type="checkbox"/>
11/04/04	ID# CK#	David Bishop 2318 240th Ave Decorah, Ia. 52101		10 ⁰⁰	<input type="checkbox"/>
11/04/04	ID# CK#	Doug Lau 801 E. Sunrise New Hampton, Ia. 50659		50 ⁰⁰	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 3635⁰⁰

TOTAL (if last page of this schedule)

\$ 3635⁰⁰

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Brian Quirk for State Representative

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11/01/04	ID# CK# 310	Tina Fink 130 2nd Ave Cresco, Ia 52136	organize campaign database and run errands for campaign	\$ 1000.00
11/02/04	ID# CK# 378	Kolbys 601 Milwaukee New Hampton, Ia. 50659	food for campaign volunteers	25.00
11/02/04	ID# CK# 379	Warren Brown 400 2nd Ave Cresco, Ia 52136	organizing data base and run errands for campaign	500.00
11/04/04	ID# CK# 380	D.J.S. Linn Ave New Hampton, Ia. 50659	food & bev for election night volunteers	300.00
11/04/04	ID# CK# 501	Wendy Wahl 622 Milwaukee New Hampton, Ia. 50659	catering for for election night volunteers	400.00
11/05/04	ID# CK# 502	Chaffs 602W Milwaukee New Hampton, Ia. 50659	food & bev for campaign meeting	40.00
11/06/04	ID# CK# 531	Chaffs 602W Milwaukee New Hampton, Ia. 50659	food & bev for campaign meeting	45.00 ✓
11/28/04	ID# CK# 532	Brian Quirk 1011 Sunset New Hampton, Ia. 50659	Reimbursement for Computer, (honor.) software, office space, office supplies, storage	3500.00 ✓
S/B 5810.00 SUB-TOTAL				\$ 5815.00
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 2

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Brian Quick for State Representative

SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
06/18/04	Mona Bond 900 Des Moines St Des Moines, IA 50309		Mailing for Fundraiser 5 fold	\$ 40.00	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 40.00

TOTAL (if last
page of this
schedule) \$ 40.00

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)